

In re:
Cornelius Stephens

U.S. DISTRICT COURT Case no. 20-14850
DISTRICT OF NEW JERSEY : RECD BY: 13
Chapter: 12:24 ABA
2020 JUN 12:24 P ABA
Debtor(s) :

**AMENDMENT TO SCHEDULE D, E or F
or LIST OF CREDITORS**

Please specify the List or Schedule(s) to be amended:

Schedule D - Creditors holding secured claims
 Schedule E - Creditors holding unsecured priority claims
 Schedule F - Creditors holding unsecured claims
 List of Creditors (Matrix)

JEANNE A. NAUGHTON, CLERK
JUN 09 2020
U.S. BANKRUPTCY COURT
BY *MJM* CAMDEN, N.J.
DEPUTY

The schedule or list indicated above, having been previously filed, is amended as follows:
(List name and address of creditors being added or deleted and indicate same; please use separate sheet if necessary)

Schedule D - Amended amount of claim to \$33,782.12.

Schedule F - Amended to add the following Creditors Holding unsecured claims:

Atlantic City Electric Company
P.O. Box 17006
Wilmington, DE 19850-7006

Atlas Acquisition, LLC
294 Union St
Hackensack, NJ 07601

Bridgecrest Credit Company, LLC
15001 FAA Blvd
Fort Worth, TX 76155

I hereby certify under penalty of perjury that the above information is correct.

Dated: 06/08/2020 Debtor's signature: *Cornelius Stephens*

Dated: _____ Debtor's signature: _____

Submit original and a \$26.00 fee.

If new creditors are being added as a result of this amendment, you must attach a matrix containing only those creditors being added.

In re Cornelius Stephens, Case No. 20-14850

AMENDMENT TO SCHEDULE D, E or F or LIST OF CREDITORS

Page 2 of 2.

Capital One Bank (USA) , N.A.
General Correspondence
P.O. Box 30285
Salt Lake City, UT 84130-0287

Santander Consumer USA
1601 Elm St.
Dallas, TX 75201

PYOD, LLC
Resurgent Correspondence
PO Box 10497
Greenville, SC 29603

Capital Bank
6000 Executive Boulevard
Suite 100
North Bethesda, Maryland 20852

T Mobile /T-Mobile USA Inc.
1601 Elm St.
Dallas, TX 75201

Fill in this information to identify your case:

Debtor 1 First Name	Cornelius	Middle Name	Stephens	Last Name
Debtor 2 (Spouse, if filing) First Name		Middle Name		Last Name
United States Bankruptcy Court for the District of New Jersey				
Case number (If known)	20-14850			

CLERK
U.S. DISTRICT COURT
DISTRICT OF NEW JERSEY
RECEIVED

2020 JUN -9 P 12:24

Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption.	
Brief description: <u>33 Main Street</u>	\$ <u>142,000.00</u>	<input checked="" type="checkbox"/> \$ <u>23,675.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(b)(2)
Line from Schedule A/B: <u>1.1</u>			
Brief description: <u>1932 Bergen Street</u>	\$ <u>16,500.00</u>	<input type="checkbox"/> \$ _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(b)(3)(B)
Line from Schedule A/B: <u>1.2</u>			
Brief description: <u>1998 Volvo</u>	\$ <u>500.00</u>	<input type="checkbox"/> \$ _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(2)
Line from Schedule A/B: <u>3.1</u>			

3. Are you claiming a homestead exemption of more than \$160,375?

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

No

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

No
 Yes

Debtor 1

Cornelius

First Name Middle Name

Last Name

Part 2: Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption	Specific laws that allow exemption
Brief description: _____	\$ _____	<input type="checkbox"/> \$ _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(2)
Line from Schedule A/B: _____			_____
Brief description: Household Furniture	\$ 6,500.00	<input type="checkbox"/> \$ _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)(3)
Line from Schedule A/B: 6			_____
Brief description: Electronics	\$ 1,000.00	<input type="checkbox"/> \$ _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)(3)
Line from Schedule A/B: 7			_____
Brief description: Wearing Apparel	\$ 1,500.00	<input type="checkbox"/> \$ _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)(3)
Line from Schedule A/B: 11			_____
Brief description: Tools	\$ 350.00	<input type="checkbox"/> \$ _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)(4)
Line from Schedule A/B: 12			_____
Brief description: _____	\$ _____	<input type="checkbox"/> \$ _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)(6)
Line from Schedule A/B: _____			_____
Brief description: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Line from Schedule A/B: _____			_____
Brief description: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Line from Schedule A/B: _____			_____
Brief description: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Line from Schedule A/B: _____			_____
Brief description: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Line from Schedule A/B: _____			_____
Brief description: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Line from Schedule A/B: _____			_____
Brief description: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Line from Schedule A/B: _____			_____

Fill in this information to identify your case:

Debtor 1	Cornelius	Stephens
First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name
		Last Name
United States Bankruptcy Court for the: District of New Jersey		
Case number (if known)	20-14850	

CLERK
U.S. DISTRICT COURT
DISTRICT OF NEW JERSEY
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2020 JUN -9 P 12:24

Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

FILER
JENNIFER NAGLETON, CLERK

JUN 09 2020

U.S. BANKRUPTCY COURT
CAMDEN, N.J.
DEPUTY

1. Do any creditors have claims secured by your property?

No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.

Yes. Fill in all of the information below.

Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

Column A	Column B	Column C
Amount of claim Do not deduct the value of collateral	Value of collateral that supports this claim	Unsecured portion of any

2.1 CastleRock 2017 LLC

Describe the property that secures the claim:

\$ 33,782.12 \$ 148,000 \$ 0.00

Creditor's Name
West, 33 Westchester , Avenue

Number Street

Suite 2100

White Plains NY 10604

City

State ZIP Code

Home

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Who owes the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim relates to a community debt

Nature of lien. Check all that apply.

An agreement you made (such as mortgage or secured car loan)
 Statutory lien (such as tax lien, mechanic's lien)
 Judgment lien from a lawsuit
 Other (including a right to offset) _____

Date debt was incurred 07/18/2018

Last 4 digits of account number 0 0 0 6

2.2

Describe the property that secures the claim:

\$ _____ \$ _____ \$ _____

Creditor's Name

Number Street

City

State ZIP Code

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Who owes the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim relates to a community debt

Nature of lien. Check all that apply.

An agreement you made (such as mortgage or secured car loan)
 Statutory lien (such as tax lien, mechanic's lien)
 Judgment lien from a lawsuit
 Other (including a right to offset) _____

Date debt was incurred _____

Last 4 digits of account number _____

Add the dollar value of your entries in Column A on this page. Write that number here: \$ _____

Debtor 1

Cornelius

First Name Middle Name

Last Name

Case number (if known) 20-14850

Additional Page

Part 1: After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.

Column A	Column B	Column C
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion of claim If any

Describe the property that secures the claim: \$ _____ \$ _____ \$ _____

Creditor's Name

Number Street

City State ZIP Code

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Who owes the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim relates to a community debt

Nature of lien. Check all that apply.

- An agreement you made (such as mortgage or secured car loan)
- Statutory lien (such as tax lien, mechanic's lien)
- Judgment lien from a lawsuit
- Other (including a right to offset) _____

Date debt was incurred _____

Last 4 digits of account number _____



Describe the property that secures the claim: \$ _____ \$ _____ \$ _____

Creditor's Name

Number Street

City State ZIP Code

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Who owes the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim relates to a community debt

Nature of lien. Check all that apply.

- An agreement you made (such as mortgage or secured car loan)
- Statutory lien (such as tax lien, mechanic's lien)
- Judgment lien from a lawsuit
- Other (including a right to offset) _____

Date debt was incurred _____

Last 4 digits of account number _____



Describe the property that secures the claim: \$ _____ \$ _____ \$ _____

Creditor's Name

Number Street

City State ZIP Code

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Who owes the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim relates to a community debt

Nature of lien. Check all that apply.

- An agreement you made (such as mortgage or secured car loan)
- Statutory lien (such as tax lien, mechanic's lien)
- Judgment lien from a lawsuit
- Other (including a right to offset) _____

Date debt was incurred _____

Last 4 digits of account number _____

Add the dollar value of your entries in Column A on this page. Write that number here: \$ 33,782.12

If this is the last page of your form, add the dollar value totals from all pages.
Write that number here: \$ 33,782.12

Debtor 1

Cornelius

First Name

Middle Name

Last Name

Case number (if known) 20-14850

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Name _____

On which line in Part 1 did you enter the creditor? _____

Number Street _____

Last 4 digits of account number _____

City State ZIP Code _____

On which line in Part 1 did you enter the creditor? _____

Name _____

Last 4 digits of account number _____

Number Street _____

On which line in Part 1 did you enter the creditor? _____

Name _____

Last 4 digits of account number _____

Number Street _____

On which line in Part 1 did you enter the creditor? _____

Name _____

Last 4 digits of account number _____

Number Street _____

On which line in Part 1 did you enter the creditor? _____

Name _____

Last 4 digits of account number _____

Number Street _____

On which line in Part 1 did you enter the creditor? _____

Name _____

Last 4 digits of account number _____

Number Street _____

Print**Save As...****Add Attachment****Reset**

Fill in this information to identify your case:

Debtor 1	Cornelius	Stephens
	First Name	Middle Name
Debtor 2		Last Name
(Spouse, if filing)		
United States Bankruptcy Court for the: District of New Jersey		
Case number	20-14850	
(If known)		

CLERK
U.S. DISTRICT COURT
DISTRICT OF NEW JERSEY
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2020 JUN - Check if this is an
amended filing

Official Form 106E/F**Schedule E/F: Creditors Who Have Unsecured Claims**

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims**1. Do any creditors have priority unsecured claims against you?**

No. Go to Part 2.
 Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

JUN 09 2020

U.S. BANKRUPTCY COURT

BY *MJM* CAMDEN, N.J.

DEPUTY

Total claim	Priority amount	Nonpriority amount
-------------	-----------------	--------------------

2.1

Priority Creditor's Name

Last 4 digits of account number _____ \$ _____ \$ _____ \$ _____

Number Street

When was the debt incurred? _____

City State ZIP Code

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Type of PRIORITY unsecured claim:

Domestic support obligations
 Taxes and certain other debts you owe the government
 Claims for death or personal injury while you were intoxicated
 Other. Specify _____

2.2

Priority Creditor's Name

Last 4 digits of account number _____ \$ _____ \$ _____ \$ _____

Number Street

When was the debt incurred? _____

City State ZIP Code

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Type of PRIORITY unsecured claim:

Domestic support obligations
 Taxes and certain other debts you owe the government
 Claims for death or personal injury while you were intoxicated
 Other. Specify _____

Part 1: Your PRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.

Total claim	Priority amount	Nonpriority amount
-------------	-----------------	--------------------

Priority Creditor's Name _____

Last 4 digits of account number _____

\$ _____ \$ _____ \$ _____

Number Street _____

When was the debt incurred? _____

City State ZIP Code _____

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Type of PRIORITY unsecured claim:

Domestic support obligations
 Taxes and certain other debts you owe the government
 Claims for death or personal injury while you were intoxicated
 Other. Specify _____

Is the claim subject to offset?

No
 Yes

Priority Creditor's Name _____

Last 4 digits of account number _____

\$ _____ \$ _____ \$ _____

Number Street _____

When was the debt incurred? _____

City State ZIP Code _____

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Type of PRIORITY unsecured claim:

Domestic support obligations
 Taxes and certain other debts you owe the government
 Claims for death or personal injury while you were intoxicated
 Other. Specify _____

Is the claim subject to offset?

No
 Yes

Priority Creditor's Name _____

Last 4 digits of account number _____

\$ _____ \$ _____ \$ _____

Number Street _____

When was the debt incurred? _____

City State ZIP Code _____

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Type of PRIORITY unsecured claim:

Domestic support obligations
 Taxes and certain other debts you owe the government
 Claims for death or personal injury while you were intoxicated
 Other. Specify _____

Is the claim subject to offset?

No
 Yes

Debtor 1 Cornelius

Debtors

Page 10 of 33

First Name Middle Name Last Name

Case number (if known) 20-14850

Part 2: List All of Your NONPRIORITY Unsecured Claims**3. Do any creditors have nonpriority unsecured claims against you?**

No. You have nothing to report in this part. Submit this form to the court with your other schedules.
 Yes

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

4.1 Mohela
 Nonpriority Creditor's Name
 633 Sprint Drive
 Number Street
 City MO ZIP Code
 State

Total claim
 Last 4 digits of account number 2 7 4 8 \$ 96,000.00

When was the debt incurred? 01/01/1999

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify _____

4.2 Atlantic City Electric Company
 Nonpriority Creditor's Name
 P.O. Box 17006
 Number Street
 Wilmington DE 19850-7006
 City State ZIP Code

Last 4 digits of account number 2 7 4 8 \$ 7,657.76

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify Utility

4.3 Atlas Acquisition, LLC
 Nonpriority Creditor's Name
 294 Union St
 Number Street
 Hackensack NJ 07601
 City State ZIP Code

Last 4 digits of account number 0 D 9 B \$ 1,067.75

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify Utility

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.4 Atlas Acquisition, LLC Nonpriority Creditor's Name

294 Union St
 Number Street
 Hackensack NJ 07601
 City State ZIP Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number 6 5 8 7\$ 818.45

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify Utility

4.5 Atlas Acquisition, LLC Nonpriority Creditor's Name

294 Union St
 Number Street
 Hackensack NJ 07601
 City State ZIP Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number P 3 2 7\$ 619.70

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify Utility

4.6 Bridgecrest Credit Company, LLC Nonpriority Creditor's Name

15001 FAA Blvd
 Number Street
 Fort Worth TX 76155
 City State ZIP Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number 4 1 0 2\$ 16,765.53

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify Automobile Finance

Debtor 1 Cornelius

First Name Middle Name

Department

Page 12 of 33

Case number (if known)

20-14850

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.7	Capital Bank Nonpriority Creditor's Name 6000 Executive Boulevard Suite 100 Number Street North Bethesda MD 20852 City State ZIP Code			Last 4 digits of account number <u>2 2 2 1</u>	\$ <u>205.04</u>
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt			When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u>		
4.8	Capital One Bank (USA) , N.A. Nonpriority Creditor's Name General Correspondence P.O. Box 30285 Number Street Salt Lake City UT 84130-0287 City State ZIP Code			Last 4 digits of account number <u>0 1 2 3</u>	\$ <u>619.70</u>
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt			When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u>		
4.9	PYOD/Resurgent Correspondence Nonpriority Creditor's Name PO Box 10497 Number Street Greenville NC 29603 City State ZIP Code			Last 4 digits of account number <u>0 5 0 5</u>	\$ <u>677.14</u>
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt			When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Charge Card</u>		

Debtor 1 Cornelius

First Name Middle Name Last Name

Document

Page 13 of 33 Case number (if known) 20-14850

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

410 PYOD/Resurgent Correspondence Nonpriority Creditor's Name

PO Box 10497

Number Street Greenville SC 29603
City State ZIP Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number 2 4 0 5

\$ 1,266.70

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify Credit Card

411 Santander Consumer USA Nonpriority Creditor's Name

1601 Elm St.
Number Street Dallas TX 75201
City State ZIP Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number 1 3 6 4

\$ 12,748.86

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify Automobile Finance

412 T Mobile /T-Mobile USA Inc Nonpriority Creditor's Name

1601 Elm St.
Number Street Dallas TX 75201
City State ZIP Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number 3 6 2 5

\$ 430.46

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify Utility

Debtor 1 Cornelius

First Name Middle Name

Last Name

Document

Case number (if known)

20-14850

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

On which entry in Part 1 or Part 2 did you list the original creditor?

Name _____

Number Street _____

City _____ State _____ ZIP Code _____

Name _____

Number Street _____

City _____ State _____ ZIP Code _____

Name _____

Number Street _____

City _____ State _____ ZIP Code _____

Name _____

Number Street _____

City _____ State _____ ZIP Code _____

Name _____

Number Street _____

City _____ State _____ ZIP Code _____

Name _____

Number Street _____

City _____ State _____ ZIP Code _____

Name _____

Number Street _____

City _____ State _____ ZIP Code _____

Line 4.5 of (Check one): Part 1: Creditors with Priority Unsecured Claims

Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

On which entry in Part 1 or Part 2 did you list the original creditor?

Line _____ of (Check one): Part 1: Creditors with Priority Unsecured Claims

Part 2: Creditors with Nonpriority Unsecured
Claims

Last 4 digits of account number _____

On which entry in Part 1 or Part 2 did you list the original creditor?

Line _____ of (Check one): Part 1: Creditors with Priority Unsecured Claims

Part 2: Creditors with Nonpriority Unsecured
Claims

Last 4 digits of account number _____

On which entry in Part 1 or Part 2 did you list the original creditor?

Line _____ of (Check one): Part 1: Creditors with Priority Unsecured Claims

Part 2: Creditors with Nonpriority Unsecured
Claims

Last 4 digits of account number _____

On which entry in Part 1 or Part 2 did you list the original creditor?

Line _____ of (Check one): Part 1: Creditors with Priority Unsecured Claims

Part 2: Creditors with Nonpriority Unsecured
Claims

Last 4 digits of account number _____

On which entry in Part 1 or Part 2 did you list the original creditor?

Line _____ of (Check one): Part 1: Creditors with Priority Unsecured Claims

Part 2: Creditors with Nonpriority Unsecured
Claims

Last 4 digits of account number _____

On which entry in Part 1 or Part 2 did you list the original creditor?

Line _____ of (Check one): Part 1: Creditors with Priority Unsecured Claims

Part 2: Creditors with Nonpriority Unsecured
Claims

Last 4 digits of account number _____

Debtor 1 Cornelius

First Name Middle Name

Last Name

Stephens

Page 15 of 33

Case number (if known) 20-14850

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159.
Add the amounts for each type of unsecured claim.

		Total claim
Total claims from Part 1	6a. Domestic support obligations	6a. \$ _____
	6b. Taxes and certain other debts you owe the government	6b. \$ _____
	6c. Claims for death or personal injury while you were intoxicated	6c. \$ _____
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. + \$ <u>0.00</u>
6e. Total. Add lines 6a through 6d.	6e. \$ <u>0.00</u>	
		Total claim
Total claims from Part 2	6f. Student loans	6f. \$ <u>96,000.00</u>
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. \$ _____
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h. \$ _____
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. + \$ <u>112,897.09</u>
	6j. Total. Add lines 6f through 6i.	6j. \$ <u>208,897.09</u>

Fill in this information to identify your case:		
Debtor	Cornelius	Stephens
	First Name	Middle Name
		Last Name
Debtor 2 (Spouse if filing)	First Name	Middle Name
		Last Name
United States Bankruptcy Court for the: District of New Jersey		
Case number (if known)	20-14850	

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U.S. DISTRICT COURT
DISTRICT OF NEW JERSEY
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2020 JUN - 9 P 12: 25

Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

JUN 09 2020

U.S. BANKRUPTCY COURT
BY JEANNE M. WILSON, CLERK
DEPUTY

1. Do you have any executory contracts or unexpired leases?

No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B (Property) (Official Form 106A/B).

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or company with whom you have the contract or lease			State what the contract or lease is for
2.1	Xfinity/ Comcast			Internet/Cable Service
	Name 4008 N Dupont Hwy			
	Number	Street		
	, New Castle	DE	19720	
	City	State	ZIP Code	
2.2	T Mobile/T-Mobile (USA) Inc.			Cellular Telephone Service
	Name 1601 Elm St			
	Number	Street		
	Dallas	TX	75201	
	City	State	ZIP Code	
2.3				
	Name			
	Number	Street		
	City	State	ZIP Code	
2.4				
	Name			
	Number	Street		
	City	State	ZIP Code	
2.5				
	Name			
	Number	Street		
	City	State	ZIP Code	

Fill in this information to identify your case:		
Debtor 1	Cornelius	Stephens
	First Name	Middle Name
		Last Name
Debtor 2		
(Spouse, if filing)	First Name	Middle Name
		Last Name
United States Bankruptcy Court for the: District of New Jersey		
Case number	20-14850	
(if known)		

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U.S. DISTRICT COURT
DISTRICT OF NEW JERSEY
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Check if this is: An amended filing
 A supplement showing postpetition chapter 13 expenses as of the following date:
 MM / DD / YYYY

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

No. Go to line 2.
 Yes. Does Debtor 2 live in a separate household?
 No
 Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.

2. Do you have dependents?

Do not list Debtor 1 and Debtor 2.

No

Yes. Fill out this information for each dependent.....

Do not state the dependents' names.

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

Step-Son

9

No

Yes

Son

3

No

Yes

Daughter

2

No

Yes

No

Yes

No

Yes

3. Do your expenses include expenses of people other than yourself and your dependents?

No

Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.)

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

If not included in line 4:

4a. Real estate taxes
 4b. Property, homeowner's, or renter's insurance
 4c. Home maintenance, repair, and upkeep expenses
 4d. Homeowner's association or condominium dues

Your expenses

4.	\$	789.76
4a.	\$	350.00
4b.	\$	
4c.	\$	110.00
4d.	\$	

Debtor 1	Cornelius	Stephens	Case number (if known)
	First Name	Middle Name	20-14850
	Last Name		

		Your expenses
5. Additional mortgage payments for your residence, such as home equity loans		5. \$ _____
6. Utilities:		
6a.	Electricity, heat, natural gas	6a. \$ 120.00
6b.	Water, sewer, garbage collection	6b. \$ 35.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c. \$ 24.00
6d.	Other. Specify: _____	6d. \$ _____
7. Food and housekeeping supplies		7. \$ 297.00
8. Childcare and children's education costs		8. \$ _____
9. Clothing, laundry, and dry cleaning		9. \$ _____
10. Personal care products and services		10. \$ _____
11. Medical and dental expenses		11. \$ _____
12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.		12. \$ 80.00
13. Entertainment, clubs, recreation, newspapers, magazines, and books		13. \$ _____
14. Charitable contributions and religious donations		14. \$ _____
15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a.	Life insurance	15a. \$ _____
15b.	Health insurance	15b. \$ _____
15c.	Vehicle insurance	15c. \$ _____
15d.	Other Insurance. Specify: _____	15d. \$ _____
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____		16. \$ _____
17. Installment or lease payments:		
17a.	Car payments for Vehicle 1	17a. \$ _____
17b.	Car payments for Vehicle 2	17b. \$ _____
17c.	Other. Specify: _____	17c. \$ _____
17d.	Other. Specify: _____	17d. \$ _____
18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).		18. \$ _____
19. Other payments you make to support others who do not live with you. Specify: _____		19. \$ _____
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.		
20a.	Mortgages on other property	20a. \$ _____
20b.	Real estate taxes	20b. \$ _____
20c.	Property, homeowner's, or renter's insurance	20c. \$ _____
20d.	Maintenance, repair, and upkeep expenses	20d. \$ _____
20e.	Homeowner's association or condominium dues	20e. \$ _____

Debtor 1 Cornelius Stephens Case number (if known) 20-14850
First Name Middle Name Last Name

21. Other. Specify: _____

21. +\$_____

22. Calculate your monthly expenses.

22a. Add lines 4 through 21.

22a. \$ 1,805.76

22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2

22b. \$_____

22c. Add line 22a and 22b. The result is your monthly expenses.

22c. \$ 1,805.76

23. Calculate your monthly net income.

23a. Copy line 12 (your combined monthly income) from Schedule I.

23a. \$ 2,864.00

23b. Copy your monthly expenses from line 22c above.

23b. - \$ 1,805.76

23c. Subtract your monthly expenses from your monthly income.

The result is your monthly net income.

23c. \$ 1,058.24

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

No.

Yes. Explain here:

Fill in this information to identify your case:		
Debtor 1	Cornelius First Name	Stephens Middle Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name
Last Name		
United States Bankruptcy Court for the: District of New Jersey		
Case number (if known)	20-14850	

CLERK
U.S. DISTRICT COURT
DISTRICT OF NEW JERSEY
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2020 JUN -9 P 12:25

Check if this is an amended filing

FILED
JEANNE A. NAUGHTON, CLERK

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

JUN 10 2020

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Give Details About Your Marital Status and Where You Lived Before

1. What is your current marital status?

Married
 Not married

2. During the last 3 years, have you lived anywhere other than where you live now?

No
 Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

Debtor 1:

Dates Debtor 1 Debtor 2:
lived there

Dates Debtor 2
lived there

Same as Debtor 1

Same as Debtor 1

311 N 5th Avenue

Number Street

From 03/12/2014

Number Street

From _____

To _____

To 07/10/2018

Lebanon

PA 17046

City

State ZIP Code

City State ZIP Code

Same as Debtor 1

Same as Debtor 1

Number Street

From _____

From _____

To _____

To _____

City

State ZIP Code

City State ZIP Code

3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

No
 Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

Part 2: Explain the Sources of Your Income

Debtor 1 Cornelius
 First Name Middle Name Stephens Last Name

Case number (if known) 20-14850

4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.

If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

No

Yes. Fill in the details.

	Debtor 1	Debtor 2	
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.
From January 1 of current year until the date you filed for bankruptcy:	<input type="checkbox"/> Wages, commissions, bonuses, tips <input checked="" type="checkbox"/> Operating a business	\$ <u>2,412.00</u>	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business
For last calendar year: (January 1 to December 31, 2019) YYYY	<input type="checkbox"/> Wages, commissions, bonuses, tips <input checked="" type="checkbox"/> Operating a business	\$ <u>20,587.00</u>	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business
For the calendar year before that: (January 1 to December 31, 2018) YYYY	<input type="checkbox"/> Wages, commissions, bonuses, tips <input checked="" type="checkbox"/> Operating a business	\$ <u>14,986.00</u>	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business

5. Did you receive any other income during this year or the two previous calendar years?

Include income regardless of whether that income is taxable. Examples of *other income* are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

No

Yes. Fill in the details.

	Debtor 1	Debtor 2	
	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.
From January 1 of current year until the date you filed for bankruptcy:		\$ _____	\$ _____
		\$ _____	\$ _____
		\$ _____	\$ _____
For last calendar year: (January 1 to December 31, 2019) YYYY		\$ _____	\$ _____
		\$ _____	\$ _____
		\$ _____	\$ _____
For the calendar year before that: (January 1 to December 31, 2018) YYYY		\$ _____	\$ _____
		\$ _____	\$ _____
		\$ _____	\$ _____

Debtor 1 Cornelius Stephens Case number (if known) 20-14850

First Name Middle Name Last Name

Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?

No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more?

No. Go to line 7.

Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.

Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts.

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

No. Go to line 7.

Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

	Dates of payment	Total amount paid	Amount you still owe	Was this payment for...
Creditor's Name		\$ _____	\$ _____	<input type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit card <input type="checkbox"/> Loan repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other _____
Number Street				
City State ZIP Code				
Creditor's Name		\$ _____	\$ _____	<input type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit card <input type="checkbox"/> Loan repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other _____
Number Street				
City State ZIP Code				
Creditor's Name		\$ _____	\$ _____	<input type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit card <input type="checkbox"/> Loan repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other _____
Number Street				
City State ZIP Code				

Debtor 1 **Cornelius Stephens** Case number (if known) 20-14850

7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?

Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

No

Yes. List all payments to an insider.

	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
Insider's Name		\$	\$	
Number Street				
City State ZIP Code		\$	\$	
Insider's Name		\$	\$	
Number Street				
City State ZIP Code				

8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?

Include payments on debts guaranteed or cosigned by an insider.

No

Yes. List all payments that benefited an insider.

	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
Insider's Name		\$	\$	
Number Street				
City State ZIP Code		\$	\$	
Insider's Name		\$	\$	
Number Street				
City State ZIP Code				

Debtor 1 Cornelius
 First Name Middle Name Stephens Last Name

Case number (if known) 20-14850

Part 4: Identify Legal Actions, Repossessions, and Foreclosures

9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?

List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

No

Yes. Fill in the details.

Nature of the case	Court or agency	Status of the case
<u>Holdover</u>	<u>Salem County Superior Court</u> Court Name <u>97 Market Street</u> Number Street	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded
<u>Case title CastleRock 2017 LLC</u> <u>v. Cornelius Stephens</u> <u>Case number LT-968-19</u>	<u>Salem</u> <u>NJ</u> <u>08079</u> City State ZIP Code	
<u>Estate of Josephine Stephens</u> <u>Case number 2020-510</u>	<u>Surrogates Court County of Suffolk</u> Court Name <u>320 Center Drive</u> Number Street	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
	<u>Riverhead</u> <u>NY</u> <u>11901</u> City State ZIP Code	

10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?

Check all that apply and fill in the details below.

No. Go to line 11.

Yes. Fill in the information below.

Describe the property	Date	Value of the property	
<u>Creditor's Name</u>		\$ _____	
<u>Number Street</u>	<u>Explain what happened</u>		
<u>City</u> <u>State</u> <u>ZIP Code</u>	<input type="checkbox"/> Property was repossessed. <input type="checkbox"/> Property was foreclosed. <input type="checkbox"/> Property was garnished. <input type="checkbox"/> Property was attached, seized, or levied.		
<u>Creditor's Name</u>	<u>Describe the property</u>	<u>Date</u>	<u>Value of the property</u>
<u>Number Street</u>	<u>Explain what happened</u>		\$ _____
<u>City</u> <u>State</u> <u>ZIP Code</u>	<input type="checkbox"/> Property was repossessed. <input type="checkbox"/> Property was foreclosed. <input type="checkbox"/> Property was garnished. <input type="checkbox"/> Property was attached, seized, or levied.		

Debtor 1 Cornelius
First Name Middle Name Last Name

Case number (if known) 20-14850

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

No

Yes. Fill in the details.

Describe the action the creditor took	Date action was taken	Amount
---------------------------------------	-----------------------	--------

Creditor's Name _____

\$ _____

Number Street _____

City _____

State _____ ZIP Code _____

Last 4 digits of account number: XXXX-_____

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

No

Yes

Part 5: List Certain Gifts and Contributions

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

No

Yes. Fill in the details for each gift.

Gifts with a total value of more than \$600 per person _____

Describe the gifts _____

Dates you gave the gifts _____

Value _____

Person to Whom You Gave the Gift _____

\$ _____

Number Street _____

City _____ State _____ ZIP Code _____

Person's relationship to you _____

Gifts with a total value of more than \$600 per person _____

Describe the gifts _____

Dates you gave the gifts _____

Value _____

Person to Whom You Gave the Gift _____

\$ _____

Number Street _____

City _____ State _____ ZIP Code _____

Person's relationship to you _____

Debtor 1 Cornelius Stephens Case number (if known) 20-14850

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?

No

Yes. Fill in the details for each gift or contribution.

Gifts or contributions to charities that total more than \$600	Describe what you contributed	Date you contributed	Value
Charity's Name			\$ _____
			\$ _____
Number Street			
City State ZIP Code			

Part 6: List Certain Losses

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?

No

Yes. Fill in the details.

Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
			\$ _____

Part 7: List Certain Payments or Transfers

16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

No

Yes. Fill in the details.

Person Who Was Paid	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Number Street			\$ _____
			\$ _____
City State ZIP Code			
Email or website address			
Person Who Made the Payment, if Not You			

Debtor 1 Cornelius Stephens Case number (*if known*) 20-14850

Description and value of any property transferred			Date payment or transfer was made	Amount of payment
Person Who Was Paid			_____	\$ _____
Number	Street		_____	\$ _____
City	State	ZIP Code		
Email or website address				
Person Who Made the Payment, if Not You				
17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16.				
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill in the details.				
Description and value of any property transferred			Date payment or transfer was made	Amount of payment
Person Who Was Paid			_____	\$ _____
Number	Street		_____	\$ _____
City	State	ZIP Code		

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property).

Do not include gifts and transfers that you have already listed on this statement.

No

Yes. Fill in the details.

Description and value of property transferred	Describe any property or payments received or debts paid in exchange	Date transfer was made
Person Who Received Transfer	_____	_____
Number Street	_____	_____
City State ZIP Code		
Person's relationship to you	_____	_____
Person Who Received Transfer	_____	_____
Number Street	_____	_____
City State ZIP Code		
Person's relationship to you	_____	_____

Debtor 1 Cornelius Stephens Case number (*if known*) 20-14850

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)

No

Yes. Fill in the details.

Description and value of the property transferred	Date transfer was made
---	------------------------

Name of trust _____

Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

No

Yes. Fill in the details.

Name of Financial Institution Number Street	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
<u>Chime Bank</u> <u>409 Silverside Road</u>	XXXX- <u>2 6 8 3</u>	<input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____	_____	\$ <u>14.31</u>
<u>Wilmington DE 10010</u>	XXXX- <u>9 8 0 7</u>	<input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____	_____	\$ <u>1,250.00</u>
<u>Novo</u> <u>43 W 23rd Street</u>	XXXX- <u>9 8 0 7</u>	<input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____	_____	\$ <u>1,250.00</u>
<u>New York NY 10010</u>	XXXX- <u>9 8 0 7</u>	<input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____	_____	\$ <u>1,250.00</u>

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

No

Yes. Fill in the details.

Name of Financial Institution Number Street	Who else had access to it? Number Street	Describe the contents City State ZIP Code	Do you still have it? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
_____	_____	_____	_____

Debtor 1 Cornelius Stephens Case number (if known) 20-14850

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

No

Yes. Fill in the details.

Who else has or had access to it?

Describe the contents

Do you still have it?

Name of Storage Facility

Name _____

No

Number Street

Number Street _____

Yes

City State ZIP Code

City _____ State _____ ZIP Code _____

Part 9: Identify Property You Hold or Control for Someone Else

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

No

Yes. Fill in the details.

Where is the property?

Describe the property

Value

Owner's Name

\$ _____

Number Street

Number Street _____

City State ZIP Code

City _____ State _____ ZIP Code _____

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- **Environmental law** means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- **Site** means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- **Hazardous material** means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

No

Yes. Fill in the details.

Governmental unit

Environmental law, if you know it

Date of notice

Name of site

Governmental unit

Number Street

Number Street

City State ZIP Code

City _____ State _____ ZIP Code _____

City _____ State _____ ZIP Code _____

Debtor 1 Cornelius Stephens Case number (if known) 20-14850

25. Have you notified any governmental unit of any release of hazardous material?

No
 Yes. Fill in the details.

Governmental unit	Environmental law, if you know it	Date of notice
Name of site	Governmental unit	
Number Street	Number Street	
City	State ZIP Code	
City	State ZIP Code	

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

No
 Yes. Fill in the details.

Court or agency	Nature of the case	Status of the case
Case title	Court Name	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
	Number Street	
Case number	City State ZIP Code	

Part 11: Give Details About Your Business or Connections to Any Business

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time
 A member of a limited liability company (LLC) or limited liability partnership (LLP)
 A partner in a partnership
 An officer, director, or managing executive of a corporation
 An owner of at least 5% of the voting or equity securities of a corporation

No. None of the above applies. Go to Part 12.

Yes. Check all that apply above and fill in the details below for each business.

Merimades Business Name 8001 Castor Avenue Number Street	Describe the nature of the business Laundrey Service	Employer Identification number Do not include Social Security number or ITIN. EIN: <u>8 1 4 3 8 8 1 8 7</u>
Philadelphia PA 19132 City State ZIP Code	Name of accountant or bookkeeper None	Dates business existed From <u>05/08/2017</u> To <u>Present</u>
Choice Employment Services Business Name 347 5th Avenue Number Street	Describe the nature of the business Recruiter	Employer Identification number Do not include Social Security number or ITIN. EIN: <u>3 4 2 0 6 7 3 3 9</u>
New York NY 10016 City State ZIP Code	Name of accountant or bookkeeper None	Dates business existed From <u>07/09/2018</u> To <u>Present</u>

Debtor 1	Cornelius	Stephens	Case number (if known) 20-14850
	First Name	Middle Name	Last Name
Business Name		Describe the nature of the business	
		Employer Identification number Do not include Social Security number or ITIN.	
Number Street		Name of accountant or bookkeeper	
		EIN: _____	
City _____ State _____ ZIP Code _____		Dates business existed	
		From _____ To _____	

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

No

Yes. Fill in the details below.

Date issued

Name _____ MM / DD / YYYY _____

Number Street _____

City _____ State _____ ZIP Code _____

Part 12: Sign Below

I have read the answers on this **Statement of Financial Affairs** and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$260,000, or imprisonment for up to 20 years, or both.
18 U.S.C. §§ 152, 1341, 1519, and 3571.



Signature of Debtor 1



Signature of Debtor 2

Date 06/08/2020

Date _____

Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

No
 Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

No
 Yes. Name of person _____ . Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Fill in this information to identify your case:

Debtor 1	Cornelius Stephens		
First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: Eastern District of New York			
Case number (if known)	20-14850		

CLERK
U.S. DISTRICT COURT
DISTRICT OF NEW JERSEY
RECEIVED

2020 JUN -9 P 12:26

Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Part 1: Summarize Your Assets

	Your assets	
	Value of what you own	
1. Schedule A/B: Property (Official Form 106A/B)		
1a. Copy line 55, Total real estate, from Schedule A/B	\$ 158,500.00	
1b. Copy line 62, Total personal property, from Schedule A/B.....	\$ 21,615.48	
1c. Copy line 63, Total of all property on Schedule A/B	\$ 180,115.48	

Part 2: Summarize Your Liabilities

	Your liabilities	
	Amount you owe	
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)		
2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$ 33,782.12	
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)		
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F.....	\$ 112,897.09	
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F.....	+ \$ 96,000.00	
	Your total liabilities	
	\$ 242,679.21	

Part 3: Summarize Your Income and Expenses

4. Schedule I: Your Income (Official Form 106I)		
Copy your combined monthly income from line 12 of Schedule I	\$ 2,864.00	
5. Schedule J: Your Expenses (Official Form 106J)		
Copy your monthly expenses from line 22c of Schedule J	\$ 1058.24	

Debtor 1 **Cornelius Stephens**
First Name Middle Name Last Name

Case number (if known) **20-14850**

Part 4: Answer These Questions for Administrative and Statistical Records

6. Are you filing for bankruptcy under Chapters 7, 11, or 13?

No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
 Yes

7. What kind of debt do you have?

Your debts are primarily consumer debts. *Consumer debts* are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
 Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

\$ **2,412.00**

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

Total claim

From Part 4 on Schedule E/F, copy the following:

9a. Domestic support obligations (Copy line 6a.) \$ **0.00**

9b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$ **0.00**

9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$ **0.00**

9d. Student loans. (Copy line 6f.) \$ **96,000.00**

9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) \$ **0.00**

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) + \$ **0.00**

9g. Total. Add lines 9a through 9f. \$ **96,000.00**